



Please type a plus sign (+) inside this box → +

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h1 style="margin: 0;">TRANSMITTAL FORM</h1> <p style="margin: 5px 0;"><i>(to be used for all correspondence after initial filing)</i></p>	Application Number	10/016,289	
	Filing Date	October 31, 2001	
	First Named Inventor	DARLING, Anne Marie	
	Group Art Unit	3621	
	Examiner Name	Greene, Daniel L.	
Total Number of Pages in This Submission	4	Attorney Docket Number	G08.058

ENCLOSURES <i>(check all that apply)</i>		
<input type="checkbox"/> Fee Transmittal Form <div style="margin-left: 20px;"><input type="checkbox"/> Fee Attached</div> <input type="checkbox"/> Amendment / Reply <div style="margin-left: 20px;"><input type="checkbox"/> After Final</div> <div style="margin-left: 20px;"><input type="checkbox"/> Affidavits/declaration(s)</div> <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <div style="margin-left: 20px;"><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53</div>	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Notice of Appeal <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below): Credit Card Form \$440.00 and Acknowledgement postcard.</i>
<div style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: top; margin-bottom: 5px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Nathaniel Levin
Signature	
Date	July 27, 2004

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:			
		July 27, 2004	
Type or printed name	Edith Martin		
Signature		Date	July 27, 2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.